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## FACSIMILE TRANSMITTAL COVER SHEET

DATE: 5/16/05 ATTORNEY DOCKET NUMBER: MLP 7163  
PTO FACSIMILE NUMBER: (703) 872-9306PLEASE DELIVER THIS FACSIMILE TO: Examiner Robert C. Watson  
THIS FACSIMILE IS BEING SENT BY: Richard L. Bridge  
NUMBER OF PAGES: 15 INCLUDING COVER SHEETTIME SENT: 4:25 pm OPERATOR'S NAME Michelle Grindstaff

## CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that this paper is being facsimile transmitted to  
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Type of paper transmitted: Amendment B After FinalApplicant's Name: Sueme et al.Serial No. (Control No.): 10/008,514 Examiner: Robert WatsonFiling Date: 11/8/2001 Art Unit: 3723 Confirmation No.: 5416Application Title: RECEIVING STAND FOR FRAME STACKING SYSTEMIF YOU DO NOT RECEIVE ALL PAGES CLEARLY, CALL BACK AS SOON AS  
POSSIBLE. CONFIRMING NUMBER IS (314) 231-5400.

MLP 7163  
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of Sueme, et al.

Art Unit 3723

Serial No. 10/008,514

Filed November 8, 2001

Confirmation No. 5416

For RECEIVING STAND FOR FRAME STACKING SYSTEM

Examiner Robert C. Watson

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Amendment B After Final

TO THE COMMISSIONER FOR PATENTS,

SIR:

In response to the final Office action dated March 17,  
2005 please amend the application as follows:

Amendments to the claims are reflected in the claim  
listing beginning on page 2.

Remarks begin on page 12.

05/17/2005 HDENESS1 00000042 191345 10008514

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FEE TRANSMITTAL

Application Number 10/008,514  
Filing Date November 8, 2001  
Inventor(s) Sueme et al.  
Examiner Name Robert C. Watson  
Attorney Docket Number MLP 7163

Art Unit 3723  
Confirmation No. 5416

[ ] Applicant claims small entity status.

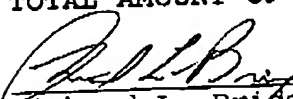
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1. [ ] BASIC FILING, SEARCH AND EXAMINATION FEES  
(Type: \_\_\_\_\_) Subtotal (1) \$ \_\_\_\_\_
2. [X] EXCESS CLAIM FEES  
Total Claims 30 - 20 (HP) = 10 x Fee 50 = \$500.00  
Indep Claims     -     (HP) =     x Fee     = \$        
Multiple Dependent Claims Fee                      \$             
(HP = highest number of claims paid for) Subtotal (2) \$500.00
3. [ ] APPLICATION SIZE FEE  
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(Application + Drawings) (round up to whole #)  
Subtotal (3) \$ \_\_\_\_\_
4. [ ] OTHER FEE(S)  
[ ] \_\_\_\_\_ month extension of time  
[ ] Information disclosure statement  
[ ] 37 CFR 1.17(q) processing fee  
[ ] Non-English specification  
[ ] Notice of Appeal  
[ ] Filing a brief in support of appeal  
[ ] Request for oral hearing  
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